FORM D

UNITED STATES 142716', SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

FORM D

SEC Mail Nail Processing
Section

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NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6) AND/OR UNIFORM LIMITED OFFERING EXEMPTION

OMB APPROVAL					
OMB NUMBER: 3235-0076					
Expires: April 30, 2008 Estimated average burden					
hours per response	16.00				

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Offering of Series A Proferred Shares in		<u> </u>			
Filing Onder (Check box(es) that apply		505 🛛 Rule 506	☐ Section 4(6)	☐ ULOE	
Type of Filing: ■ New Filing	☐ Amendment				
	A, BASIC IDEN	ITIFICATION DATA			
1. Enter the information requested about	ut the issuer				
Name of Issuer (Check if this is ar	amendment and name has cha	anged, and indicate chang	ge.)		
CP 125 Worth Avenue LLC					
Address of Executive Offices	•	treet, City, State, Zip Co	de) Telephone	Number	
c/o Crocker Partners LLC-225 N.E. Mi	zner Blvd. Suite 200 Boca Rate	on FL 33432	561-447-18	355	
Address of Principal Business Operatio	ns (Number and S	treet, City, State, Zip Co	de) Telephone	Number	THE REPORT OF THE PART OF THE PROPERTY OF THE PART OF
(if different from Executive Offices)					08023170
Brief Description of Business					
Real Estate Investment					
Type of Business Organization					
	☐ limited partnership, all	randy formad	M other (nlesse	enacifu):Limi	ited Liability Co
☐ corporation ☐ business trust	☐ limited partnership, an	-	M office (blease)	specify). Lini	•
□ pasmess must	infilted partnership, to				PBOCECCED
		Month	Year		PROCESSED
Actual or Estimated Date of Incorporat	ion or Organization:	ا الناب	0 7 ⊠ Ac	tuat 🗀 I	Setimated EED 2 4 as -
Jurisdiction of Incorporation or Organiz	•	Poetal Service abbreviation	-	tuai 🛄 I	Estimated FEB 2 1 2008
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GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

CN for Canada; FN for other foreign jurisdiction)

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those state that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

A. BASIC IDENTIFICATION DATA

- 2. Enter the information requested for the following:
 Each promoter of the issuer, if the issuer has been organized within the past five years;
 Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
 - Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and

Each general and managing partner of partnership issuers.

Check Box(es) that Apply:	□ Promoter	☐ Beneficial Owner	⊠ Executive Officer	☐ Director	☐ Manager
Full Name (Last name first, if ind Wedge, William J.	lividual)				
Business or Residence Address c/o Crocker Partners LLC-225 N.		er and Street, City, State, Z uite 200 Boca Raton FL 33			
Check Box(es) that Apply:	□ Promoter	☐ Beneficial Owner	☐ Executive Officer	□ Director	☐ Manager
Full Name (Last name first, if ind	ividual)				
Business or Residence Address	(Numb	er and Street, City, State, Z	Zip Code)		
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ Manager
Full Name (Last name first, if ind	lividual)				
Business or Residence Address	(Numb	er and Street, City, State, 2	Zip Code)		
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	□ Director	☐ Manager
Full Name (Last name first, if ind	lividual)				
Business or Residence Address	(Numb	er and Street, City, State, 2	Zip Code)	.,	
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if inc	lividual)		+ #·		
Business or Residence Address	(Numb	er and Street, City, State, 2	Zip Code)		
Check Box(es) that Apply:	□ Promoter	☐ Beneficial Owner	☐ Executive Officer	□ Director	☐ General and/or Managing Partner
Full Name (Last name first, if inc	lividual)				
Business or Residence Address	(Numb	er and Street, City, State, 2	Zip Code)		
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if inc	lividual)				
Business or Residence Address	(Numb	er and Street, City, State, 2	Zip Code)		
					

				B. INFO	ORMATIC	N ABOUT	r offerin	NG				
1. Has the iss	uer sold o	r does the is	cuer intend	to call to n	on accredit	ad investor	e in this offi	ring?			Yes	No ⊠
1. mas the iss	uci sola, ol	i does die is		,				-			u	W
			Ansv	ver also in	Appendix,	Column 2,	if filing und	er ULOB.				
2. What is the	e minimum	investment	that will be	accepted i	from any in	dividual?					\$ <u>1,000.00</u>	
											Yes	No
3. Does the o	ffering per	mit joint ow	nership of a	single uni	t?	•••••••						⊠
4. Enter the i remuneration agent of a bropersons to be	for solicita ker or deal- listed are a	tion of purc er registered ssociated pe	hasers in co I with the S crsons of su	nnection w EC and/or	ith sales of with a state	securities i or states, I	in the offerions the interior	ng, If a per of the brol	son to be li ter or deale	sted is an a	associated than five	d person or
Full Name (L	ast name fi	rst, if indivi	dual)									
H& L Equitie												
Business or R	esidence A	ddress (Nu	mber and St	reet, City,	State, Zip C	ode)						
1175 Peachtre	e St. N.E.,	100 Colony	y Square, St	ite 2120, <i>A</i>	tlanta, GA	30361-620	6					
Name of Asso												
States in Whi					Solicit Purcl							
•			dividual Sta	,							All State	
[AL] [IL]	[AK] [IN]	[AZ]	[AR] [KS]	[CA] [KY]	[CO]	[CT] [ME]	[DE]	[DC]	[xFL]	[xGA] [MN]	[HI] [MS]	[ID] [MO]
[MT]	[NE]	[IA] [NV]	[NH]	[LN]	[LA] [NM]	[NY]	[xMD] [xNC]	[MA] [ND]	[MI] [OH]	[xOK]	[OR]	[xPA]
[RI]	[SC]	[SD]	[XTN]	[xTX]	[UT]	[VT]	[xVA]	[WA]	[WV]	[XUK] [WI]	[WY]	[PR]
Business or R	esidence A	ddress (Nu	mber and St	reet, City,	State, Zip C	lode)				•··		
Name of Asse	ociated Bro	ker or Deal	er									
States in Whi											All State	es
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
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[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Full Name (L	ast name fi	rst, if indivi	dual)									
Business or R	esidence A	ddress (Nu	mber and St	reet, City,	State, Zip C	Code)						
Name of Asse	ociated Bro	ker or Deal	er									
States in Whi					Solicit Purc	hasers						
•			dividual Sta	•				4-5			All State	
[AL]	[AK]	(AZ)	[AR]	[CA]	[CO]	(CT)	[DE]	[DC]	(FL)	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	(OH)	[OK]	[OR]	[PA]

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged		
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	\$	\$
	Equity	\$ <u>125,000,00</u>	\$
	□ Common 🖾 Preferred		
	Convertible Securities (including warrants)	\$	\$
	Partnership Interests	\$	\$
	Other (Specify)	\$	
	Total	\$125,000,00	s
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	Number Investors	Aggregate Dollar Amount of Purchases
	Accredited Investors	125	\$ <u>125,000,00</u>
	Non-accredited Investors		\$0
	Total (for filings under Rule 504 only)	125	\$ <u>125,000,00</u>
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.		
	Type of offering	Type of Security	Dollar Amount Sold
	Rule 505		\$
	Regulation A		\$
	Rule 504	 	\$
	Total		\$
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		- S
	Printing and Engraving Costs		□ \$
	Legal Fees		№ \$ <u>10,000.00</u>
	Accounting Fees		- \$
	Engineering Fees	11	\$
	Sales Commissions (specify finders' fees separately)		№ \$ <u>6,250,00</u>
	Other Expenses (identify)	·····	№ \$ <u>16,250.00</u>
	Total		32,500.00 32,500.00 32,500.00

C. OFFERING PRIC	CE, NUMBER OF INVESTORS, EXPENSES AND US	OF	ROCEEDS		
1 and total expenses furnished in respor "adjusted gross proceeds to the issuer." 5. Indicate below the amount of the adjusted used for each of the purposes shown. If the estimate and check the box to the left of the stimate and check the stimate and che	gross proceeds to the issuer used or proposed to be e amount for any purpose is not known, furnish an le estimate. The total of the payments listed must equal at forth in response to Part C - Question 4.b above.				\$ <u>92,500.00</u>
			Payments to Officers, Directors, Affiliates	& 1	Payments To Others
Salaries and fees			\$	_ 🛮	\$
Purchase of real estate		□	\$	_ 0	s
Purchase, rental or leasing and installa	tion of machinery and equipment		\$	_ 0	\$
Construction or leasing of plant building	ngs and facilities		\$		\$
offering that may be used in exchange	ding the value of securities involved in this for the assets or securities of another		\$		\$
Repayment of indebtedness			s		\$
Working Capital			s	_ Ø	\$92,500.00
Other (specify):		0	s		\$
			\$		\$
Column Totals		□	\$	_ 🛛	\$92,500.00
Total Payments Listed (Column totals	added)		⊠ \$	\$ <u>92,500</u>	0.00
	D. FEDERAL SIGNATURE				
following signature constitutes an undertak	gned by the undersigned duly authorized person. If this no ting by the issuer to furnish to the U.S. Securities and Exch e issuer to any non-accredited investor pursuant to paragrap	ange C	ommission, u	ipon wi	
Issuer (Print or Type)	Signature		Date		
CP 125 Worth Avenue LLC	legand		11-	1/6	7
Name of Signer (Print or Type)	Title of Signer (Print or Type)				
William J. Wedge	Vice President				

- ATTENTION -

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

